

When facing abdominal pain, don't forget ACNES!



Daeniker Caroline*, Caflisch Marianne*, Soroken Cindy*

Adolescent medicine consultation; General Pediatric Ward; Woman, Child and Adolescent Department; Geneva University Hospitals, Geneva, Switzerland

INTRODUCTION

Abdominal pain is a frequent complaint in adolescence. Anterior cutaneous nerve entrapment syndrom (ACNES) is insufficiently known and therefore underdiagnosed.

CLINICAL CASES

12-year-old presenting with a very localized pain in the upper left quadrant with nocturnal awakening.

She had multiple consultations in the emergency department, 2 hospitalizations, 3 normal abdominal ultrasound and multiple visits with specialists (gastroentérologist, gynecologist, infectiologist, nephrologist) without further explanation for the pain. She was treated with laxatives and different pain killers. Finally, an infiltration of lidocaine alleviated the pain.

15-year-old presenting with abdominal pain, diminished appetite and loss of 1kg in a week.

Physical examination showed a very localized pain in lower right quadrant, positive pinching test and positive Carnett's sign.

The urine and blood test and abdominal ultrasound all returned normal.

She had a lidocain infiltration followed with a neurectomy because of refractory pain.

DISCUSSION

CAUSE: entrapment of the terminal thoracic nerve branches, T7-T12, passing through the anterior rectus muscle fascia and responsible for chronic neuropathic pain.

INCIDENCE: 1/1800 patients with a female predominance.

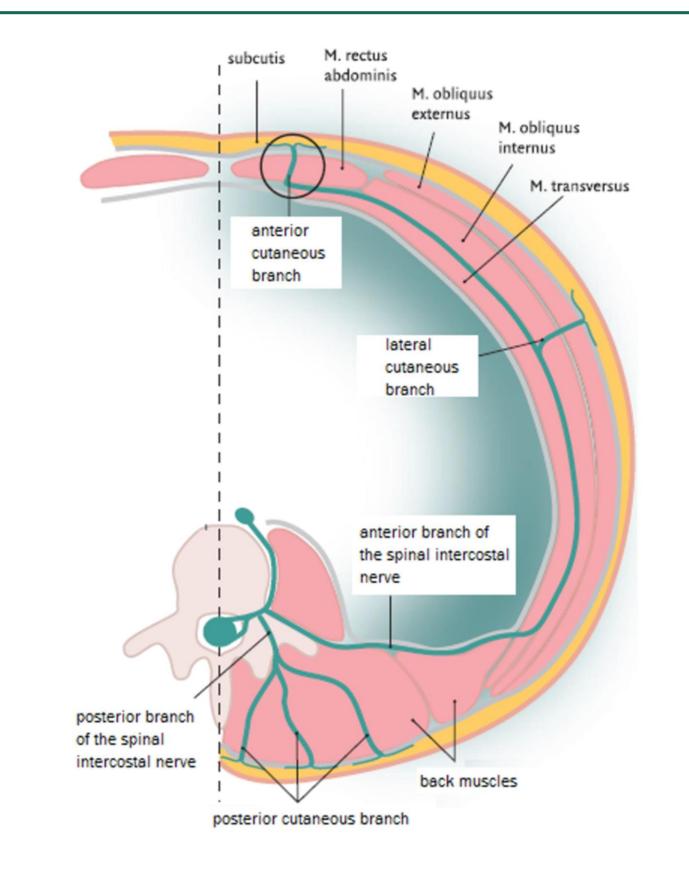
CLINICAL SIGNS

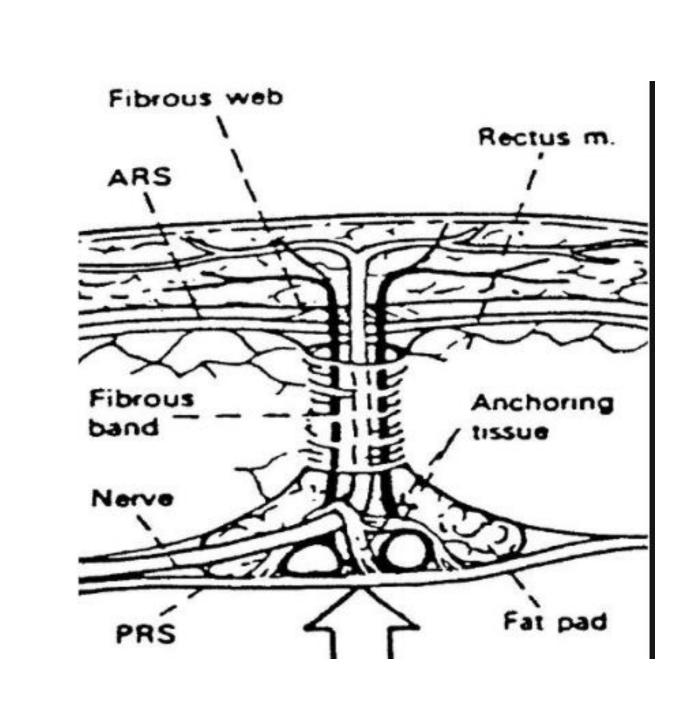
- o Pain
 - Very well localized
 - Most frequently in the right lower quadrant but can be all over the abdomen.
- Postive Pinching test: pain exacerbated by the pinching
- Positive Carnett's sign: pain when contracting the abdominal muscles
- Other physical signs: allodynia, hyper/hypoesthesia or hyperalgia.

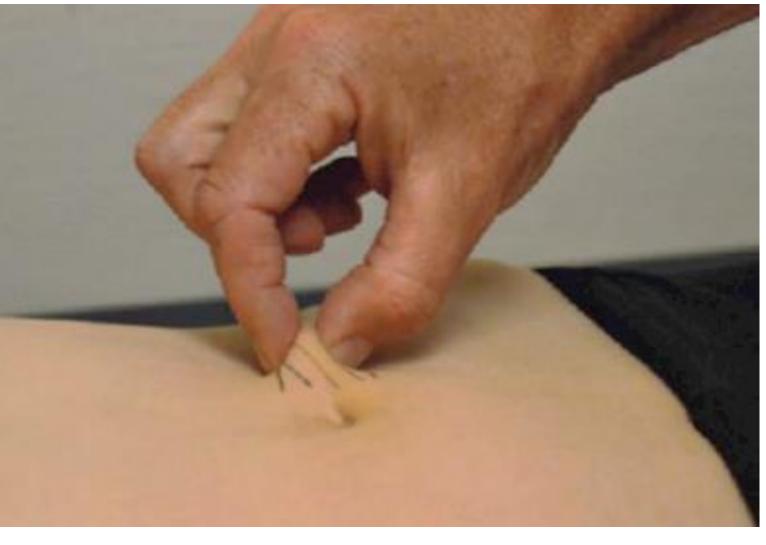
TREATMENT

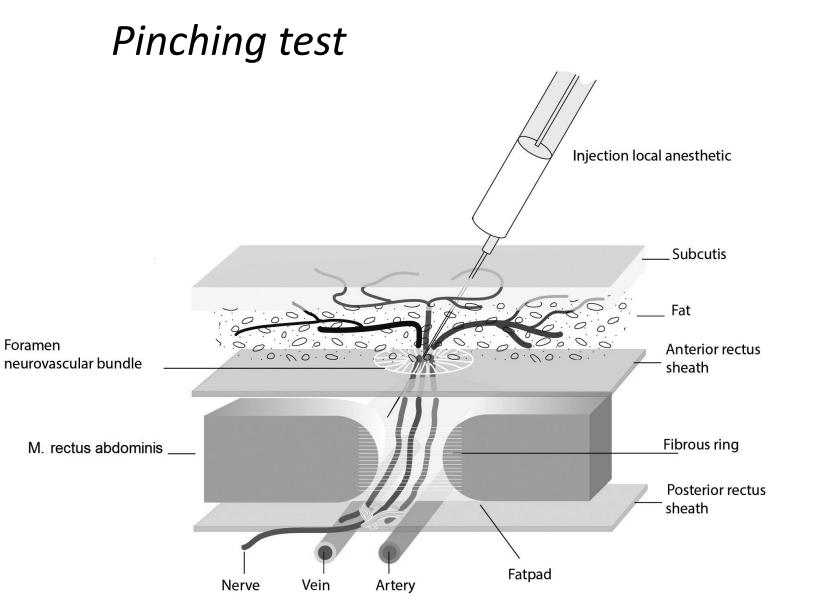
- Lidocaine infiltration
- Neurectomy
- Pain managment inbetween: TENS or Lidocain patch

PROGNOSIS: mostly favorable. The pain is immediately relieved following a local infiltration which strengthen the diagnosis.



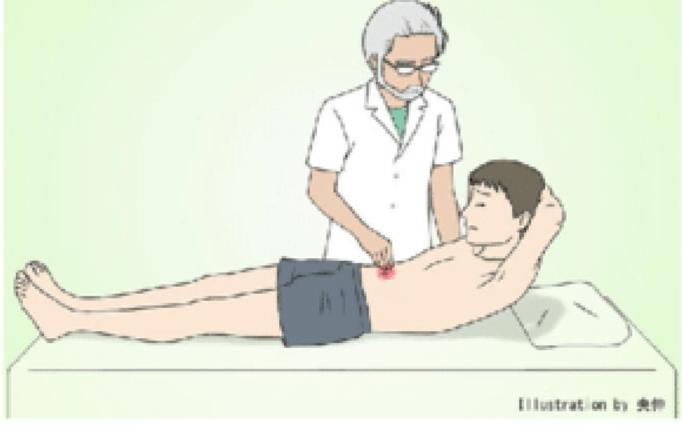






Lidocain infiltration

Illustration by ##



Carnett's sign

CONCLUSION

ACNES is underdiagnosed because neurogenic abdominal wall pain is not thought of. The diagnosis is clinical! Therefore typical physical signs must be sought.

